Town of Southampton

Main Office 116 Hampton Road Southampton, NY 11968

Phone: (631) 287-5740 **Fax:** (631) 283-5606

OFFICE OF TOWN CLERK SUNDY A. SCHERMEYER

Town Clerk Annex 25 Ponquogue Avenue Hampton Bays, NY 11946

Phone: (631) 723-2712 **Fax:** (631) 723-3080 www.southamptontownny.gov

Enter all information requested below. Sign & mail the application to Sundy Schermeyer, Town Clerk, Town of Southampton, 116 Hampton Road, Southampton, NY 11968.

*** Please Include: (1) Current Rabies Certificate (2) Spay/Neuter Certificate (3) Check for license fee made payable to: Town of Southampton ***

	☐ New License	☐ Renewal	
Owner Name:			qualify for Senior Rates – PROOF REQUIRI
Street Address:		City:	Zip:
Mailing Address, if different:			
Telephone:	En	nail Address:	
Dog Name:		ale C Female License N	fumber (renewals only):
Breed:	Co	lor / Markings: ———	
	<u>Veterin</u>	arian Information	
Name of Veterinarian:		Phone Numb	per:
Address:			
Date of Rabies Vaccination:	() 1-5	Year C 2-Years C 3	-Years
Rabies Vaccine Manufacturer:		Identifier or Marking	s:
SPAYE UNSPA UNSPA	<i>D/NEUTERED</i> dogs YED/UNNEUTERED YED/UNNEUTERED WAR, HEARING, POL	for male or female description: \$ 7.50/yr; Senior Rate: December 4 17.50/yr; Senior Rate: December 4 months of age ICE WORK, or SERVICE NYS-recognized training of	\$ 5.00/yr or Rate: \$ 15.00/yr : \$ 12.00 dogs* NO FEE
Number of years licensed:	Total a	mount paid:	_
Owner Signature:			Date: